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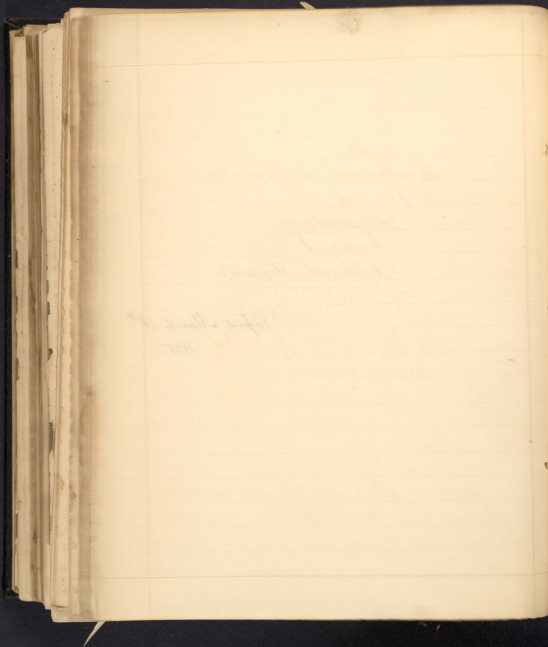
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An
Inaugural Dissertation
on
Dysentery
By
Samuel Thomas.

Read March 16th
1825.

correctly written



Dysentery

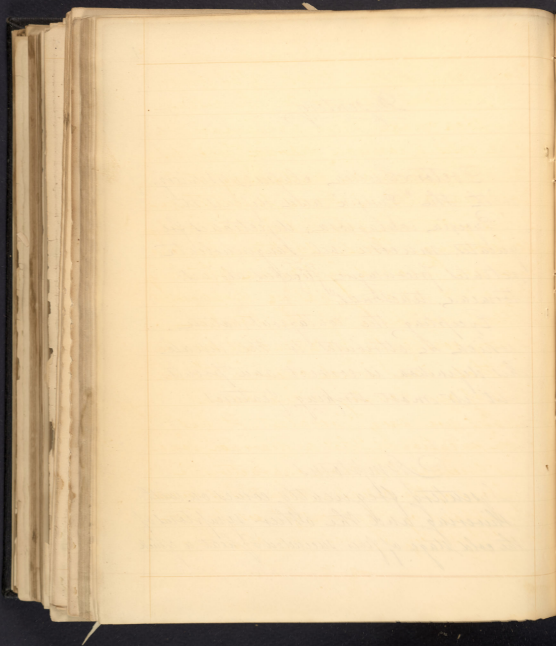
Doctor Cullen classifies Dysentery with the "Pyrexia" and defines it.

"Pyrexia contagiosa; dejectiones frequentes, mucosae vel sanguinolentae, petentes plerumque, faecibus alvini, tormina, tenesmus."

Excepting the contagious nature which he attributes to the disease his definition is correct, and points out its most striking features.

Symptoms

Dysentery frequently comes on with shivering, and the other symptoms of the cold stage of fever succeeded by heat, a quick



pulse, and intense thirst, after which
 the symptoms peculiar to the disease
 very soon make their appearance. In
 some cases a common diarrhoea precedes
 the other symptoms, and in many the
 tormina and tenesmus show them-
 selves first, the febrile symptoms quickly
 supervening. These symptoms in some
 cases are preceded by Nausea, flatulency
 and other denoting gastric derangement.
 Indeed, irritability of the stomach
 is very constantly an attendant symptom
 in those cases which occur in the dis-
 tricts of our Country, where bilious
 diseases are very prevalent. It has
 been mentioned that a diarrhoea some-
 times precedes the more characteristic
 symptoms of the disease, when this is the case
 it is supposed by Eberhara & others to pro-
 duce Dysentery "by washing off the

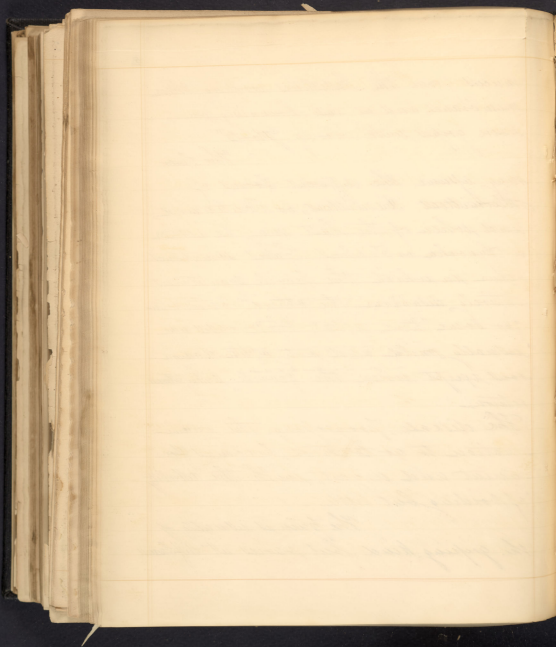
and when that day comes
the people will be in a
state of great excitement
and will be ready to
do anything for the
cause of the oppressed
and will be ready to
sacrifice their lives for
the sake of the
freedom of the
people of the world
and will be ready to
fight for the
rights of the
poor and the
oppressed
and will be ready to
die for the
cause of the
freedom of the
people of the world

mucus from the Intestines eroding their membranes, and at last bringing on, severe gripes with bloody stools.

The fever may assume the different forms of Intermittent, Remittent, or Continued, and when of the last, may be either a Synocha or Typhus. Cases sometimes occur in which the febrile symptoms entirely disappear, the others continuing for some time after; these cases are usually mild, and not often dangerous, except when the febrile symptoms return.

The disease progressing, the inclination to go to stool, becomes frequent and urgent, with the ability of voiding but little.

The pain is usually of the griping kind, but varies at different

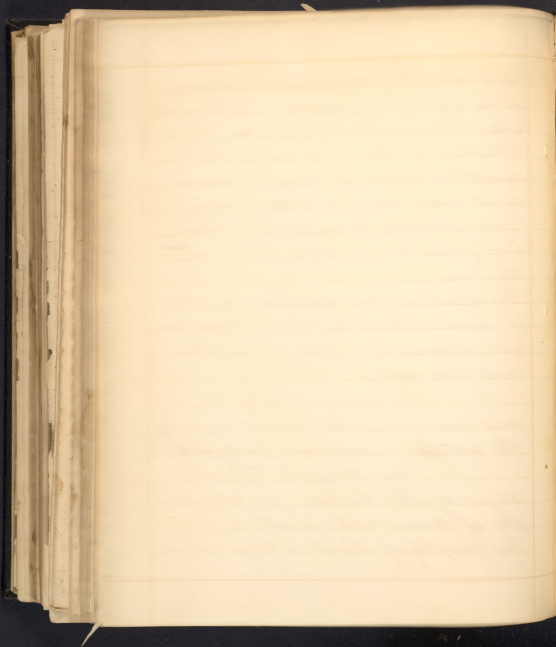


times, and the sensations complained
of by different patients often differ much.
Some, Blegbam, observes, 'are seized with
twisting of the gut which (as they
express it) draws up their bowels into
knots, and many instead of gripping
pains shifting from place to place
have fixed ones in some particular ^{parts} of
the belly.

The efforts to void any thing by stool
are usually attended with extreme pain
and followed by a painful sensation
about the anus.

As consequence of the
great irritation, and violent straining
the rectum is sometimes prolapsed.
The stools in the early
stages of the disease, usually con-
sist of mucus and blood.

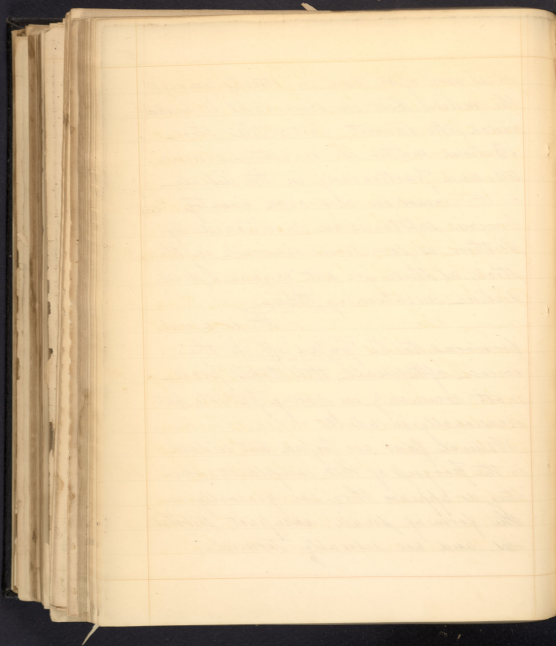
The quantity of blood in them varies.



it is very often seen in streaks amongst the mucus, but in some cases it makes much the largest part of the stool. Bilious matter is frequently evacuated, and particularly in the disease as it appears in our own Country. Various substances are mentioned by Authors as sometimes observable in the stools, as these are not common, I shall decline mentioning them.

It is usual for worms to be passed off in the course of this disease; this takes place most commonly in young Patients, but occasionally in adults.

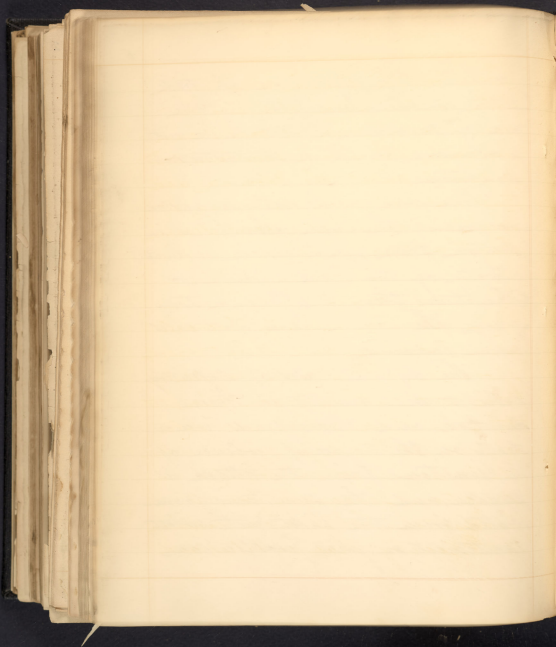
Natural feces are passed but seldom in the progress of this complaint, when they do appear they are generally in the form of small compact substances, and are usually termed



sudala. The expulsion of these either spontaneously or by the aid of medicine is attended with a remission of the most distressing symptoms.

The various functions undergo nearly the same changes as in simple fever, except where influenced directly by the local affection. Sometimes there is a painful strangury. The appetite is, in most cases much impaired.

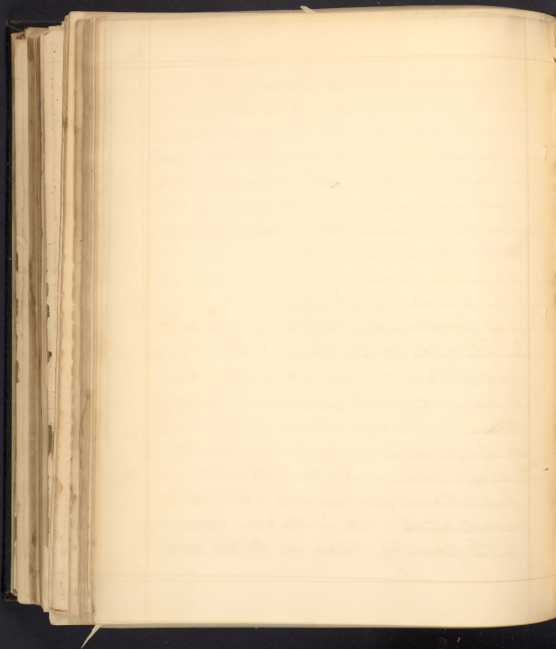
The different cases of Dysentery exhibit great variety in their duration, and this depends principally on the degree of violence of the symptoms. When the attack is sudden, and the symptoms aggravated from the first, with violent excitement or great prostration



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hence &c, the disease may prove
fatal in the space of a very few
days. Whereas, when it comes on
gradually, the febrile symptoms miti-
gate entirely, the lochia and
tenderness not very distressing, it
sometimes continues a considerable
length of time.

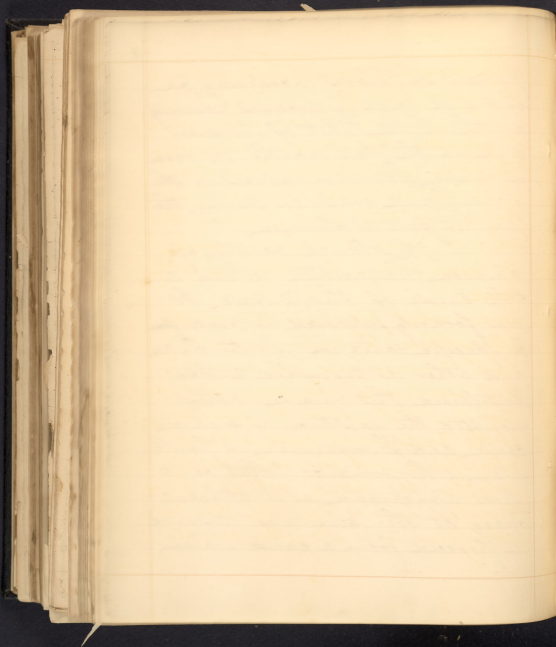
Causes.

Dysentery, usually prevails
as an Epidemic, and is but rarely
sporadic. It is more frequently
to be met with in warm climates
than in those which are cold
or temperate, and is very inciden-
tal to armies when located in
situations favourable for its
production. It is more common
in the Country than in Cities, and



prevails in places bordering on low and marshy grounds, generally in the latter part of summer and in the fall months. It occasionally, however, appears in the spring and continues during the greater part of summer.

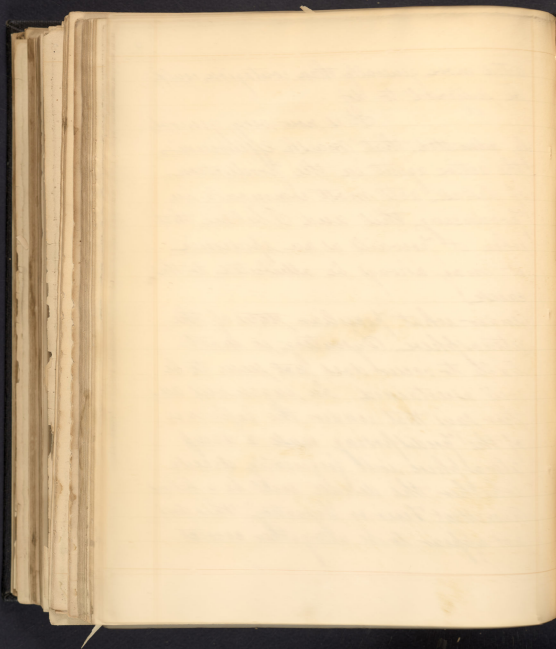
Much variety of opinion has existed relative to the cause of this Disease. It was formerly supposed to arise from a specific contagion. Doctor Cullen and other distinguished authors entertained this opinion. Others doubted the existence of such a cause, and Zimmerman, in particular, who remarks, "that on its first appearance, as it attacked many at the same time it seemed to proceed from a cause which



acted more generally than contagion could be supposed to do."

It is now very generally admitted, that "Marsh Effluvia" the active agent in the production of disease, acts most commonly in producing this, and I believe, that when it prevails as an epidemic it may always be attributed to this cause.

Under what peculiar states of the atmosphere Dysentery is most liable to occur does not seem to be well ascertained. An ingenious author says "that under the influence of the predisposing cause, a damp atmosphere will frequently decide whether the disease will be a Bilious Remittent Fever or Dysentery." This does not appear to be altogether correct.

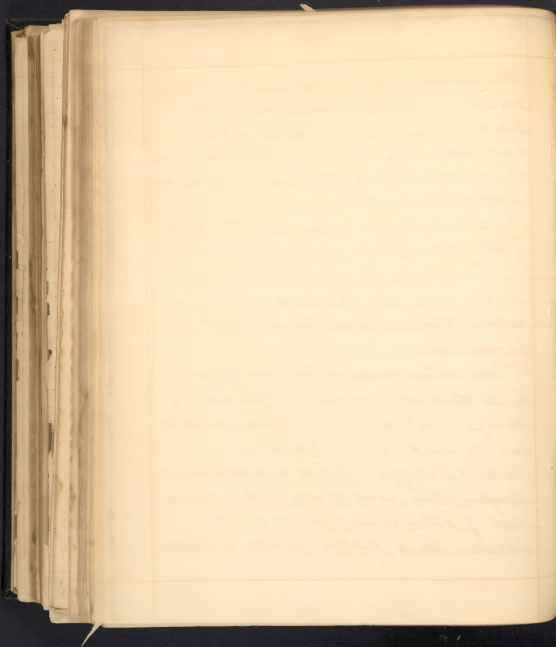


The disease has prevailed frequently under an opposite condition of the atmosphere, and it is said by some most commonly to occur after a continuance of very warm, and at the same time dry states of the weather.

It various indeed have been the states of the atmosphere during the prevalence of this disease at different times, that we are not able to mark with precision those which favour most its production.

Some other causes have been assigned by authors as sufficient to produce Dysentery. The principal of these are, cold and certain kinds of aliment.

It does not appear that a diminished temperature will alone, and independent of other causes produce this disease. In a system where a predis-



Position exists the application of cold
will very commonly excite it.

Unwholesome food, and particularly ani-
mal food in a putrid state has been
said to originate Dysentery. When
it arises from this cause a change
of diet is to be principally relied on
for the cure.

Treatment

So extended are the limits of our
Republic, and so diversified are the
forms under which disease presents
itself to the Physician in the diffe-
rent sections of the Country, that it
is impossible to lay down a regular
plan of treatment for any of our Epi-
demics. Much of the treatment
must depend on the section where
it prevails. the Particular

The first part of the paper is devoted to a
general survey of the subject. It is then
divided into three parts. The first part
deals with the history of the subject.
The second part deals with the present
state of the subject. The third part
deals with the future of the subject.

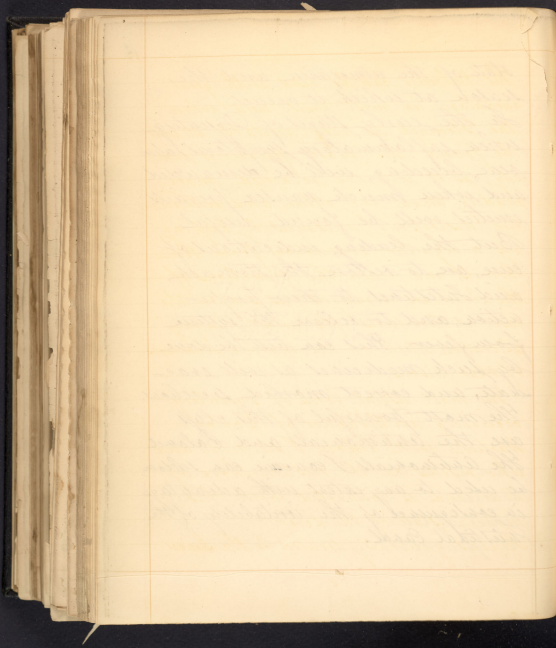
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general survey of the subject. It is then
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state of the atmosphere, and the season at which it occurs.

In the early stages of Dysentery, when inflammatory symptoms appear, bleeding will be demanded, and when much nausea prevails emetics will be found useful.

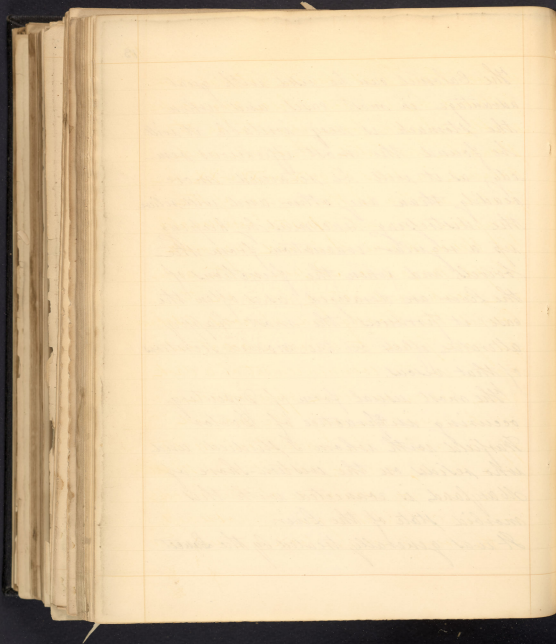
But the leading indications of cure, are to restore the stomach and Intestines to their proper action, and to relieve the system from fever. This can best be done by such medicines as will evacuate, and correct morbid secretions.

The most powerful of this class are the Antimonials and Calomel. The Antimonials I conceive can seldom be used to any extent with advantage in consequence of the irritability of the Intestinal Canal.

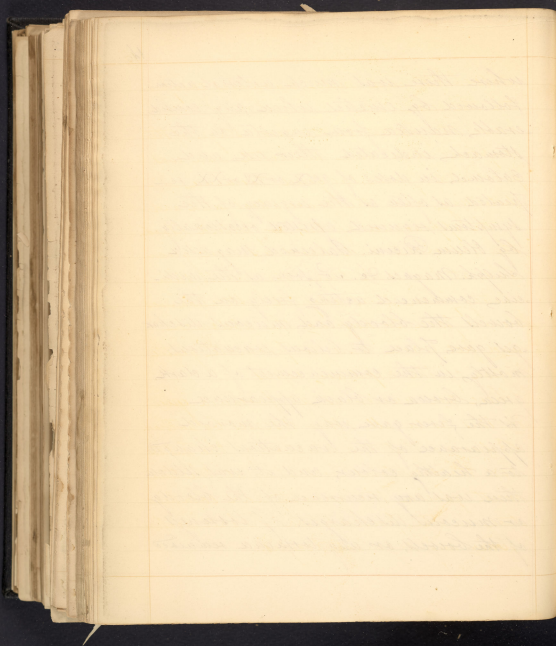


The Calomel can be used with great advantage in most cases, and when the stomach is very irritable it will be found the most efficacious remedy, as it will be retained more readily than any other, and will relieve the distressing tenesmus by keeping up a regular evacuation from the bowels, and when the functions of the Liver are deranged (as is often the case) it produces the most happy alterative effects on the morbid secretions of that viscus.

The most usual form of Dysentery occurring in the practice of Doctor Warfield with whom I studied, and who resides on the western shore of Maryland, is connected with this morbid state of the Liver. It was generally treated by the Sweet



where there was much arterial action, followed by emetics, when any considerable nausea from ingesta on the stomach indicated their use; and Calomel, in doses of gr. X. or XV. or XX. repeated as often as the urgency of the symptoms required, assisted occasionally by Oleum Ricini. Sulfated Magnesia Sulph. Magast. &c. As soon as the medicine commenced acting freely on the bowels the bloody and mucous discharge gave place to bilious evacuations; mostly in the commencement of a dark green, brown or black appearance. As the fever gave way, the morbid appearance of the evacuations changed to a healthy colour, and it was seldom there was any recurrence of the bloody or mucous discharges. If looseness of the bowels, or any tormina remained



absorbents, and mild anodynes completed the cure.

Where the patient, in the first stages of the complaint had been neglected, and was prostrated, pulse languid, tormina distressing, and the evacuations fetid, and of the appearance of tar, or putrid blood the absorbents and anodynes were given and at the same time the gently stimulating place was adopted. Attention was always paid to keeping the abdomen and feet warm, and to promote gentle action of the capillary vessels.

There are numerous set formula given in this as in all other diseases by authors. Believing that the situation of the patient and the symptoms presenting at the time must govern the quantity and combination in the prescription, I shall decline giving any regular Recipes.

Besides those remedies already mentioned, I will add, that the Aetia Plumbi, and Gum Arabic, combined with Opium, the Specuacaha with Opium or Balsam, and the mucilaginous substances, are all useful in the different stages of the disease, I have frequently seen in Dr. W.'s practice the oil of Butters used with the most happy and soothing effects.

-Fini-

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